

DOCUMENT RESUME

ED 316 314

PS 018 593

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TITLE A Welcome for Every Child--How France Achieves
Quality in Child Care: Practical Ideas for the United
States. The Report of the Child Care Study Panel of
the French-American Foundation.
INSTITUTION French-American Foundation, New York, NY.
SPONS AGENCY Du Pont Corp., Wilmington, Del.; German Marshall Fund
of the United States, Washington, D.C.
PUB DATE 89
NOTE 44p.
AVAILABLE FROM French American Foundation, 41 East 72nd Street, New
York, NY 10021 (\$10.00).
PUB TYPE Reports - Descriptive (141)
EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS *Day Care; *Educational Objectives; Educational
Policy; *Educational Quality; *Family Day Care;
*Foreign Countries; Health Services; Incentives;
*Teacher Characteristics; Teacher Education
IDENTIFIERS *France; Parental Leave; Program Characteristics

ABSTRACT

Seven principles underlying the impressive achievements of the French child care system are especially relevant to concerns and issues in the United States. First, the primary mission of child care is to help meet young children's integrated needs for education and care. Second, skilled staff is the key to program quality. Third, incentives and outreach open the door to improvements in family day care by attracting unlicensed caregivers into the system. Fourth, preventive health care is integral to children's programs. Fifth, paid and job-protected maternity leave, financed through broadly shared taxation, fulfills a social obligation to newborn and newly adopted children by ensuring their early care by parents. Sixth, the resources invested in buildings and equipment for children express children's value to society. Well-designed space and furnishings are integral to program quality. Seventh, parents can exercise their right to choose what's best for their children in ways that promote the social good only if parents can afford and have access to programs of high quality. Broad public discussion of the seven principles can enable policymakers, professionals, and parents to see more clearly the policy and program choices confronting Americans deciding about child care. (RH)

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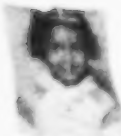
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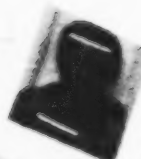
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**A
WELCOME
FOR EVERY
CHILD**

*How France
Achieves Quality in
Child Care:*

*Practical Ideas
for the
United States*

*The Report of the Child Care Study Panel of the
French-American Foundation*

*by
Gail Richardson
and
Elisabeth Marx*

The Foundation's work on child care has been made possible through the support of:

The German Marshall Fund of the United States
E.I. du Pont de Nemours and Company
American Express Foundation
Citicorp/Citibank
Corning Incorporated Foundation
Joint Foundation Support, Inc.
Michael A. Wall
The George Sherman Family Charitable Trust
The Felix and Elizabeth Rohatyn Foundation, Inc.
Stuart P. Davidson

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Book Design by Emsworth Design, Inc., New York
Printing by E.I. du Pont de Nemours and Company

Photography Credits
Cover and end pages: Gail Richardson
Other photography: Jean Gabanou, Raymond Saulnier, Gail Richardson,
Naomi Cutner, Susan Aronson, Carollee Howes

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PREFACE

In an environment of widespread public concern, Americans are now examining and reappraising the United States' child care system. With dozens of bills containing child care provisions under consideration by Congress and state legislatures, American leaders who are working for better policies and programs may well discover useful ideas abroad. Notwithstanding its different culture, France is a rich source of experience and offers examples of good practice adaptable to the United States. These do not all involve additional outlays of public money.

France's century-old public preschools are attended by all three-, four- and five-year-old children and are counted among the world's best. Its public infant-care system, although much smaller, is expanding and already features several exciting models for centers and family day care. National policies focused on children, highly trained staff, clearly defined responsibilities among agencies, and a committed leadership at all levels of government are essential to France's success.

To determine what Americans might learn in France that could be of value in constructing more effective child care practices and policies in the United States, the French-American Foundation attempted an unusual experiment in international exchange. In form, the project's central portion was familiar—a two-week study tour to a foreign country by American experts to observe the practices and policies of their counterparts. However, in the methods used to select the panel, set up the itinerary, and reach conclusions, this project has, we believe, charted new ground.

Using its own research and the advice of experts, the Foundation identified a large number of child care professionals in this country and ultimately selected a study panel of 14 people. Each panel member is a recognized and respected leader in child care or a related field, and no two members overlap significantly in either expertise or experience. Each contributed a different vantage point from which to consider French child care and provided distinct expertise for the team. The formal disciplines represented on the panel include early childhood education, economics, law, pediatrics, and psychology. The professional experiences include advocacy, corporate personnel direction, editing and publishing, family counseling and education, the founding of nurseries and child care centers, litigation, public administration, research, and teaching.

The study panel's diversity avoided the danger of viewing French experience too restrictively or academically and created a challenge intentional in the conception of the project: to find grounds for agreement concerning "lessons from France" among Americans who differed about many specific policy issues in the United States. Such a consensus, the Foundation believed, might well suggest new lines of thinking and action to American policy-makers and professionals.

To develop a useful French itinerary, the Foundation first surveyed its distinguished panel members concerning questions they most wanted to explore. Through additional correspondence and meetings—including a two-day preparatory session—the panel helped the Foundation identify guidelines for conducting the inquiry and assessing its results. The Foundation also worked closely with French advisors and program participants to set up appropriate briefings, discussions, and site visits.

The French agenda continued to evolve after the panel's arrival in France, to permit panel members to pursue new leads. The final count of meetings involving from one to 14 people each was over 70; nearly one third of these were visits to preschools and infant-toddler centers.

At the conclusion of the study tour, the consensus exhibited by the study panel covered surprisingly broad areas of French and American experience as well as many technical matters. The final report uses both essay-length chapters and highlighted examples to convey the panel's findings.

With the publication of *A Welcome for Every Child—How France Achieves Quality in Child Care: Practical Ideas for the United States*, the French-American Foundation concludes a major undertaking that opens the door to a continuing program. Building on the work of its child care study panel, the Foundation is planning additional projects that will enable French and American child care professionals to expand their productive cooperation.

These exchanges will be fully reciprocal. Notwithstanding the lesser overall development of the American child care system, Americans can offer examples of potentially great interest and value to the French in such areas as early childhood curriculum and programs for minority and immigrant children.

We look forward to continuing the work heralded by "*A Welcome for Every Child*."

Edward Hallam Tuck, President
The French-American Foundation

ACKNOWLEDGMENTS

Dozens of advisors, friends, project participants, and supporters contributed to the success of the French-American Foundation's child care project. Dorothy Sparrow of Newton, Massachusetts, first brought French child care to the Foundation's attention through her research on French social policies. As consultant to the project, she prepared a major background paper on French child care and structured the itinerary in France.

American experts in child care and related fields generously instructed the Foundation about current issues and offered valuable counsel: Joel Alpert, M.D. of Boston City Hospital; Helen Blank of the Children's Defense Fund; Dana Friedman and Ellen Galinsky of the Families and Work Institute; Paul Gionfriddo of the Connecticut State Assembly; Sharon Lynn Kagan of Yale University's Bush Center of Child Development; Jing Lyman of the National Coalition for Women's Enterprise; Joanne Lyman of Play Schools Association, Inc.; Professor Gerald Lesser of the Harvard Graduate School of Education; Kate Rand Lloyd and Mary McLaughlin of *Working Mother* magazine; Shelby Miller of the Ford Foundation; Joe Perreault of Save the Children—Atlanta; Professor Deborah Phillips of the University of Virginia's Psychology Department; Ann Rosewater of the House Select Committee on Children, Youth and Families of the U.S. Congress; Nicholas Scalera of the New Jersey Division of Youth and Family Services; Michelle Seligson of the Wellesley Center for Research on Women; Linda Tarr-Whelan of the Center for National Policy Alternatives; Dee Topol of the Primerica Foundation; and Antony Ward of Child Care, Inc.

Sheila Kamerman of Columbia University's School of Social Work gave us consistently valuable advice and suggestions, participated in preparing the study panel for their undertaking, and in many other ways enabled us to benefit from her well-known cross-cultural research on family policies.

Two other individuals inspired us to push ahead in our thinking and refine our goals. Olga Baudelot, a senior researcher with the *Centre de Recherche de l'Education Spécialisée et de l'Adaptation Scolaire*, thoroughly briefed the study panel about French child care before their trip and then arranged a three-day agenda for them in Nantes and nearby Saint Herblain. Her sensitivity to both cultures greatly enriched our experience. Anne Heald of the German Marshall Fund of the United States early on recognized the potential of child care as a field for productive French-American exchange. From her encouragement and constructive suggestions our project benefited at every stage in its development.

French experts on the faculty of New York University aided our preparations by briefing the study panel on French politics, society, and families: Professor Nicholas Wahl of the Institute of French Studies; Professor Martin Schain of the Department of Politics; and Assistant Professor Susan Carol Rogers of the Institute of French Studies and the Department of Anthropology.

Barbara Reisman and Amy Moore of the Child Care Action Campaign expressed interest and support for the project at the outset. Their generous advice led, eventually, to CCAC's crucial role in publicizing this report and assessing reactions to it.

Friends and advisors in Paris, who formed important links for the Foundation during its planning of the French itinerary, and who also

contributed to the program's success in a variety of ways included: Janine Bedoucha of the health division of the Ministry of Solidarity, Health and Social Protection; Jean-Pierre Bedoucha of the public assistance division of the city of Paris and the Ministry of Solidarity; Mary Fleming of the German Marshall Fund; Michel Garcin of the *Réseaux pour le Développement de l'Entreprise*; Dominique Lesourd of Renault; Nell and Bernard Rivière-Platt of Internships in Francophone Europe; Professor Jacques Rojot of the Sorbonne; Carol Rose of the *Centre Henri Rousselle*; Ernest Antoine Seillière of the board of directors of the *Conseil National du Patronat Français*; Chantal Sloan; Hubert Sulkowski of Shearman and Sterling; Bernard Ullmo of the forecasting division of the Ministry of Finance; and Hélène Weber-Valade of the *Institut de l'Enfance et de la Famille*.

The American Embassy in Paris arranged a reception at the Ambassador's Residence for the American study panel and French project participants and thus introduced the child care project to a larger Parisian community. We thank Mark C. Lissfelt, Deputy Chief of Mission; Robert J. Korengold, Minister-Counselor for Cultural Affairs and Information; Christopher M. Henze, Cultural Attaché; and Lini Janssens, a longtime Embassy friend of the Foundation.

We extend our profound gratitude to officials in French national ministries and municipal offices for opening doors to dozens of their colleagues (we regret that space precludes mentioning them all) thus enabling us to gain a remarkably complete look at the French child care system: Joseph Ferrier, technical advisor to the Minister of National Education; Michèle Martin of the division of schools and Danièle Renard of the international relations office, both of the Ministry of National Education; Frédéric Boyer, head of the Bureau for Children, Families and Social Life of the Ministry of Solidarity, Health and Social Protection; Paule Kassis, also of the Bureau for Children; Jacqueline Ancelin, assistant director of the *Caisse Nationale des Allocations Familiales*; Liliane Perrier of the legal staff of CNAF; Elisabeth Allaire, director of Social Services (*Action Social*) for Children and Health of the city of Paris; Jean-Luc Pariset, information officer for the Paris city health department; Charles Gautier, mayor of Saint Herblain; and Joël Rousseau, urban planning advisor to the mayor of Saint Herblain.

We are especially grateful to Hélène Dorlhac, Secretary of State for the Family to the Minister of Solidarity, Health and Social Protection for receiving the study panel and Foundation representatives and introducing us to senior ministry officials.

The French-American Foundation wishes to express its deep appreciation to the German Marshall Fund for its early support, which enabled us to go forward quickly and attract additional help. Generous support for this work was also provided by E. I. du Pont de Nemours and Company, American Express Foundation, Citicorp/Citibank, Corning Incorporated Foundation, Joint Foundation Support, Inc., Michael A. Wall, George Sherman Family Charitable Trust, the Felix and Elizabeth Rohatyn Foundation, Inc., and Stuart P. Davidson.

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OVERVIEW: FRANCE'S COMMITMENT TO CHILDREN

Child care makes news in the United States but still ranks low on the national agenda. Americans read or hear with great frequency that working parents of young children struggle to find good care that they can afford. Facts like the following reveal some of the strains. Millions of children under the age of six are in unlicensed care. Trained caregivers are in short supply and their wages are low. Child care centers lose (and must replace) 40 percent of their staff each year and family day care has turnover rates approaching 60 percent. Federal, state, and local programs are not coordinated and fail to reach many families in need.



Parents bear the immediate emotional and financial burdens that these problems create. Employers lose from \$2 to \$12 billion a year in employee absences related to sick-child care alone, according to the Bureau of National Affairs. Society eventually pays for its inadequate care of children in their later school failures, substance abuse, delinquency, wasted work lives, and uninformed citizenship.

Policymakers are under pressure to meet American child care needs more effectively. Dozens of bills containing child care provisions are presently under consideration by Congress and state legislatures. Yet testimony and votes on specific measures reveal strong disagreements about what is at stake. Issues in debate range from the support of the American family to the productivity of labor in the 21st century. What government's role should be is sharply contested.

Looking for some answers, a group of 14 professionals and experts in child care and related fields accepted the invitation of the French-American Foundation to visit France in March 1989 to observe its widely praised children's programs. We hoped to identify examples of French practice that might be adaptable to American needs and conditions. We found a country at a level of economic development similar to that of the United States but far ahead of us in ensuring that its young children are well and safely cared for.

Study panelists David Edie and Bettye Caldwell (right) and project staff member Naomi Cutner talk with preschoolers in Paris.

The National Consensus

"France will be strong in its families and will blossom in its children." These words of French President François Mitterrand express the national commitment to children that unites French citizens across regional and party lines. We heard variations of this message from dozens of officials, teachers, employers, researchers, physicians, and parents and saw it in action among more than 1,000 children.

The French terms for the out-of-home care of young children are "programs of welcoming" (*programmes d'accueil*) and "programs of awakening" (*programmes d'éveil*). The French believe that every child benefits from working and playing cooperatively with other children under skilled adult supervision. They point to national census data showing that preschool attendance improves children's chances of passing first grade—a critical indicator of later school success—across all social and economic classes.

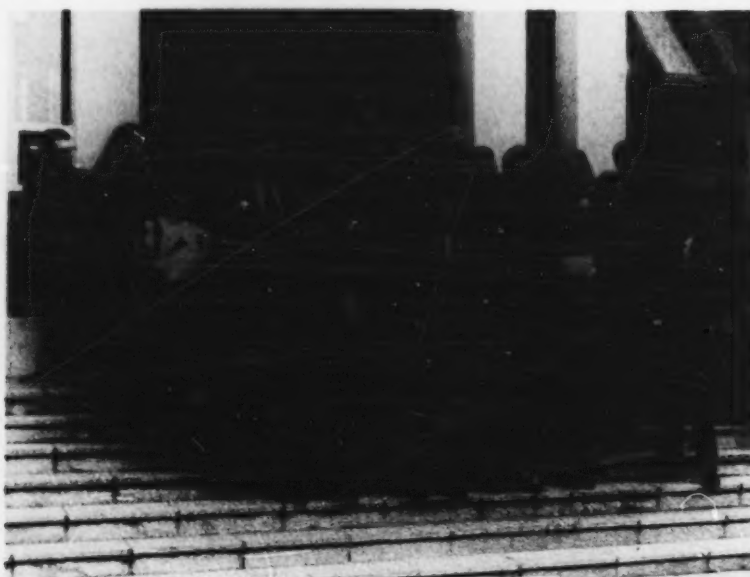
The French broadly concur that the mission of public policy regarding child care is to help children develop and thrive. They recognize

that most parents cannot afford the full cost of quality child care and consider government obligated to finance that portion that exceeds parents' means. This takes time and consistency of purpose. More than 100 years were required to turn shelters for children of the working poor into an effective system of preschool education.

Public programs for young French children are remarkably comprehensive. Free preschools (*écoles maternelles*) serve nearly 90 percent of all children three, four, and five years old, and publicly subsidized private schools serve the remainder. Several types of good infant-toddler care—including centers (*crèches collectives*), family day care networks (*crèches familiales*), and independent, licensed family day care providers (*assistantes maternelles*)—are already available to a large proportion of working parents' infants and toddlers. More programs are planned to keep up with the explosion of demand since the 1960s.

Teachers and other professional staff for French children's programs are systematically recruited and trained to high levels of competence. All preschool teachers (*institutrices*) and directors (*directrices*) have training equivalent to a master's degree in early childhood and elementary education. Directors of infant-toddler programs are pediatric nurses (*puéricultrices*) who have professional training in public health, child development, and administration. Infant-toddler educators (*éducatrices*) have a degree (*baccalauréat*) that is approximately equivalent to two years of college in the United States, and an additional two-year professional course in early childhood education and child development.

Mayor Charles Gautier of Saint Herblain (center front) and municipal officials receive the child care study panel during a visit to Brittany coordinated by French researcher Olga Baudelot. (left front)

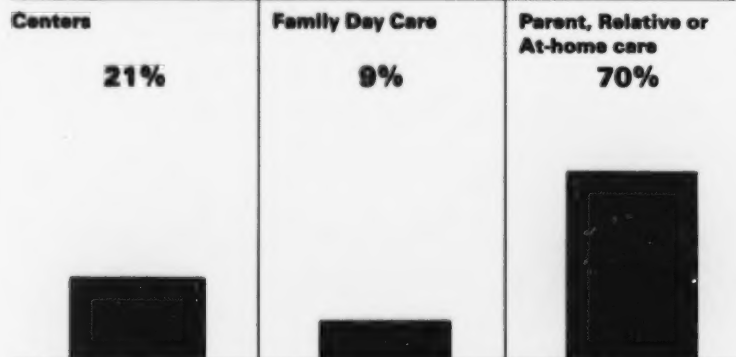


CHILD CARE USE BY TYPE IN FRANCE AND THE UNITED STATES, 1985

Infants and Toddlers

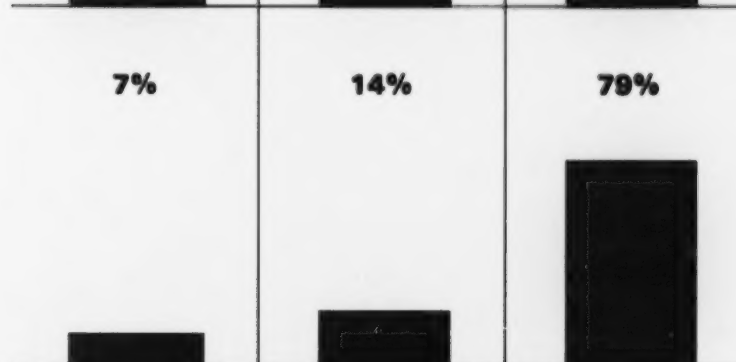
FRANCE

Total: 2.8 million children



UNITED STATES

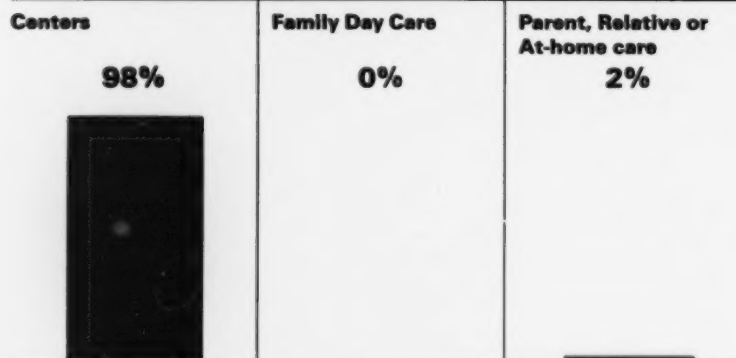
Total 10.9 million children



Three to Five Year Olds

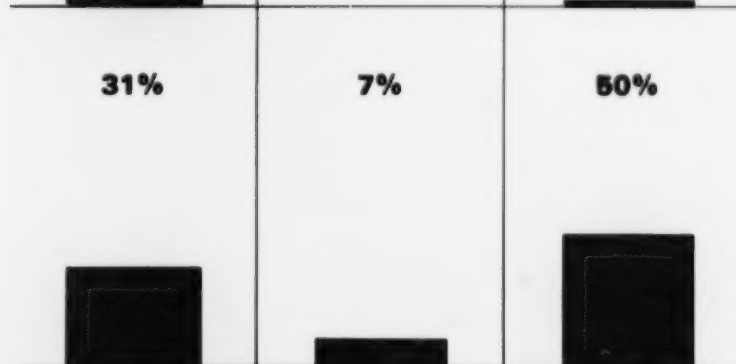
FRANCE

Total 2.3 million children



UNITED STATES

Total 10.0 million children



Source: Caisse Nationale des Allocations Familiales; Ministère de l'Éducation Nationale; U.S. Census Bureau; U.S. Department of Education; U.S. Department of Labor.



In France, nearly all three to five year olds attend pre-schools such as this one in Les Saules, where children engage in water play at a specially designed fountain.

An extensive national service of preventive health care for mothers and their infants—with nearly 10,000 doctors and nurses on staff—has reduced France's infant-mortality rate to the world's eighth lowest. (By contrast, the United States ranks 19th.) Systematic linkages between health care services and children's programs help ensure that every child in infant-toddler and preschool care receives regular preventive health care. Preventive health consultants monitor and advise all programs for young children.

Incentives promote quality in child care. Family day care providers are entitled to employee benefits and social security once they become licensed. Students training to be preschool teachers receive cash stipends in addition to a free education; they agree, on entering a training program, to spend five years in the field after graduation. Municipalities receive special capital and operating subsidies for fulfilling the terms of supply-expan-

sion and quality-enhancement "contracts for infants" (*contrats enfance*), which they enter into with a national agency.

France's maternal leave law gives all working mothers paid leave with job security (*congé de maternité*) during the last six weeks of pregnancy and for 10 weeks after childbirth. Ten weeks of paid leave are given for adoptions. The French view parental leave laws as the fulfillment of a social obligation to infants as well as to parents.

Child care enters even the realms of urban planning and architecture. Municipal officials assess children's needs for care facilities when adopting strategies and budgets for urban development. Funding to build and renovate infant-toddler centers and preschools is often generous.

This impressive array of achievements for children is organized administratively into manageable segments of responsibility and clear streams of funding that are allocated among national, regional,

and municipal agencies. The Ministry of National Education (*Ministère de l'Éducation Nationale*) establishes policy and curriculum for, and staffs, preschools. Municipal governments (*municipalités*) initiate and administer all publicly sponsored child care services for infants and toddlers. They also run before- and after-school, lunch, and vacation programs for preschoolers. Moreover, they build, furnish, renovate, and maintain the facilities that house both infant-toddler and preschool programs.

The Maternal and Infant Protection service (*Protection Maternelle et Infantile*), directed from 96 administratively autonomous regional centers (one for each county-size *département*), offers a range of preventive health services to child care programs and individual children. The National Family Allowance Fund (*Caisse Nationale des Allocations Familiales*) subsidizes all types of legal infant-toddler care through support both to municipalities, which run centers, and to parents who use licensed family day care providers. The Ministry of Solidarity, Health, and Social Protection (*Ministère de la Solidarité, de la Santé et de la Protection Sociale*), through its Children's Bureau, promotes public

education and legislation to protect children's interests and is currently shaping new legislation to help improve family day care.

France spends a stunning \$7.12 billion annually—approximately \$130 per capita—on its publicly sponsored child care and education. (This includes the \$5 per capita spent on preventive maternal and infant health care and on health services linked with child care programs. It does not include the costs of parental leave). Of this amount, national agencies annually spend \$2.78 billion (39 percent), which is raised primarily through value-added sales taxes, and another \$0.37 billion (5 percent), which is raised through payroll taxes on employers. Municipal agencies annually spend \$2.56 billion (36 percent), which is raised primarily through local land taxes.

Parents annually spend \$1.40 billion (20 percent of the national total for child care) out of family incomes. It is worthy of note that France's extensive system of family allowances helps parents offset the costs of raising children but is not intended as a substitute for the public funding of child care programs.

If the United States were to commit equivalent public resources to child care and linked health services, this would approximate \$23 billion a year, of which \$13 billion would be spent annually by federal agencies and \$10 billion by state and local agencies. We would triple our present public expenditures.



The mission of child care in France is to help children develop and thrive.

**FRANCE COMPARED WITH THE UNITED STATES IN
POPULATION, INCOME, AND SELECTED PUBLIC EXPENDITURES**

	UNITED STATES	FRANCE
POPULATION (millions, 1985)	239.3	55.2
children under 3	10.9	2.8
children 3-5	10.0	2.3
CHILDREN IN CHILD CARE (out-of-home, non-relative, 1988)		
children under 3	2.2	0.6
children 3-5	5.4	2.3
PERCENTAGE OF MOTHERS IN THE WORKFORCE (1987)	55%	48%
PER CAPITA INCOME (US dollars) (1985)	\$16,494	\$9,281
PER CAPITA TAXES (US dollars) (1985)	\$5,130	\$4,487
PUBLIC EDUCATION EXPENDI- TURES AS A PERCENTAGE OF THE GNP (1983)	5.5%	7.1%
PUBLIC DEFENSE EXPENDI- TURES AS A PERCENTAGE OF THE GNP (1983)	6.5%	4.0%

Sources: Caisse Nationale des Allocations Familiales; Children's Defense Fund; Organisation de Coopération et de Développement Economiques; Repères et Références Statistiques sur les Enseignements et la Formation, 1988.

**CHILD CARE EXPENDITURES IN FRANCE, 1987
(Billions of U.S. dollars)**

	TOTAL	PUBLIC AND PRIVATE SHARES (AND SOURCES OF REVENUE)			
		PUBLIC SECTOR			PRIVATE
		NATIONAL (mostly value- added tax)	NATIONAL FAMILY ALLOWANCE FUND (employer payroll tax)	LOCAL (mostly land tax)	PARENTS
NURSERY SCHOOL	5.0	2.8	0.0	1.7	0.5
INFANT AND TODDLER CARE	1.87	0.0	0.37	0.6	0.9
GROUP CARE (primarily centers and family day care networks)	1.3	0.0	0.3	0.6	0.4
LICENSED FAMILY DAY CARE	0.57	0.0	0.07	0.0	0.5
PREVENTIVE MATERNAL AND CHILD HEALTH CARE	0.25	0.0	0.0	0.22	0.03
TOTAL	7.12	2.8	0.37	2.52	1.43

Source: Caisse Nationale des Allocations Familiales; Institut National de la Statistique et des Etudes Economiques (INSEE); Protection Maternelle et Infantile;



The principles of child care in France are relevant to the United States.

A New Frame of Reference for American Child Care

The principles that animate the French child care system and underlie its impressive achievements should be of great interest to Americans. The seven principles that we identify in this report are especially relevant to current concerns and issues in the United States.

Although they come from a country that has chosen to centralize more of its politics and administration than has the United States, they are not bound to any particular political or economic structure. We could find many contexts for their application in both public and private sectors.

The broad public discussion of these principles could enable American policymakers, professionals,

and parents to see more clearly the policy and program choices confronting us in decisions about child care. Such a discussion could help move Americans toward the consensus needed to set priorities and devote the public and private resources required to secure what we aspire to for our children.

- The primary mission of child care is to help meet young children's integrated needs for education and care. To this end, public policy seeks to ensure that all out-of-home programs for children welcome them into society and awaken their capacities for development.

- Skilled staff is the key to program quality. Staff qualifications are essential to consider when establishing all other program components, including ratios of adults to children.

- Incentives and outreach open the door to improvements in family day care by attracting unlicensed caregivers into the system.

- Preventive health care is a vital foundation of good child care and can be linked in many ways to children's programs.

- Paid and job-protected maternity leave, financed through broadly shared taxation, fulfills a social obligation to newborn and newly adopted children by ensuring their early care by parents.

- The resources and beauty invested in buildings and equipment for children celebrate and express children's value to society. Well-designed space and furnishings are integral to program quality.

- Parents can exercise their right to choose what's best for their children in ways that promote the social good only if they can afford, and have access to, programs of quality.

Public Child Care Programs in France for Children under Six

Virtually all French children three to five years old attend preschools. About 85 percent of them are served by free programs run by the Ministry of National Education for the benefit of all children, not just those of working parents. Another 13 percent attend privately run, but publicly subsidized, programs.

About 27 percent of all infants and toddlers are served by centers (including preschools that admit two-and-a-half year olds), family day care networks, and independent licensed family day care providers; another 3% are cared for by unlicensed home-based caregivers. Key features and average per-child costs of these French programs are listed below.

Preschools (Ecoles Maternelles)

The core program of these nearly full-day (8:30 A.M.–4:30 P.M.), noncompulsory schools consists of three morning and three afternoon hours of language arts and developmentally appropriate exercises, crafts, games, dance, singing, rest, and play.

All preschool teachers have training equivalent to a master's degree. Each one is

responsible for a class averaging 28 students, of whom 22 normally attend. A teacher is assisted by an aide (one for every two classrooms) and by lunch and nap-time staff. A teacher has two hours at mid-day for lunch and class preparations.

To accommodate the schedules of working parents, most preschools are linked with "wrap-around" programs (*services périscolaires*) offered before and after school, at lunchtime, and during vacations and other free-time periods. These add-on programs typically extend the day's schedule by an hour in the morning and an hour and a half in the afternoon to accommodate drop-off times as early as 7:30 A.M. and pick-up times as late as 6:00 P.M.

The yearly cost per pupil is \$2,100. Of this amount, public funding pays \$1,890 for the core costs of teachers' salaries and buildings. Parents pay the remaining \$210 for the "wrap-around" programs, if they choose to use them.

Infant-toddler Centers (Crèches Collectives) and Family Day Care Networks (Crèches Familiales)

The French have developed two distinctive types of full-day group care for infants and toddlers: the infant-toddler

center and the family day care network. Both of these programs are intended for the children of working parents.

Both centers and family day care networks emphasize developmentally appropriate activities and are supervised by pediatric nurses who have special training in public health, child development, and program administration. Infant-toddler centers are housed at a single location. By contrast, family day care networks consist of a number of licensed home-based caregivers who are recruited, trained, and supervised from a central hub, which also sponsors regular activities for them and the children they care for.

National standards for infant-toddler centers specify ratios of one adult staff person for every five children who do not walk and one for every eight children who do. However, in family day care networks each provider cares for a maximum of three children in addition to her own. Centers are usually open from 7:00 A.M. until 7:00 P.M.

Parents pay on a sliding scale that is based primarily on income. In Paris, where costs are generally higher than elsewhere in France, parents typically pay an annual fee for one child that is set at 14 percent of their yearly

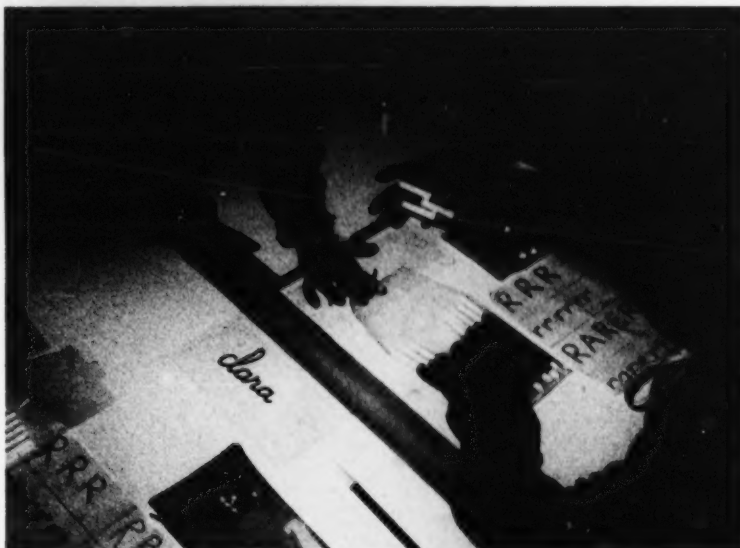
income and ranges from \$1,750 to \$4,000. The poorest families pay \$195 and the richest pay \$4,725 a year for one child, fees that are set at less than 14 percent of parents' annual income in both cases. (Families having more than one child in center care pay at lower rates for the additional children.) Public agencies pick up the remainder of the \$9,880 annual per-child cost of infant-toddler centers and the \$7,020 annual per-child cost of family day care networks.

Small-scale Centers

Several small-scale infant-toddler programs meet special needs and preferences that are not limited to those of working parents. For example, *haltes garderies* offer drop-in, part-time care for mothers who care most of the time for their own children. *Crèches parentales* enable parents to participate in the supervision of their own children and the administration of programs.

Independent Licensed Family Day Care Providers (Assistentes Maternelles)

Like home-based caregivers in networks, these providers may care for no more than three children other than their



own. Each one is advised and monitored by a specially trained pediatric nurse who visits her home at least once every three months and sometimes as often as once every three weeks. Parents pay \$11 to \$18 a day per child. The French government reimburses parents for the payment of the providers' social security taxes and gives them a special tax deduction for using licensed rather than unlicensed caregivers.

Language exercises prepare French preschoolers for the challenges of primary school.

THE MISSION IS TO WELCOME AND AWAKEN EVERY CHILD

The mission of child care is to "welcome" children into society and "awaken" their full capacities for development. All young children have a similar need for, and an equal right to, these benefits. Society has an obligation to provide them and an interest in doing so. Public policy regarding children meets this obligation and protects social interest by seeking to achieve quality in every child care program.

The French take it for granted that society owes good care and education to all children. Thus all public child care programs must strive to offer children developmentally appropriate activities and proper nutrition, rest, and health care. Limited financial or other means may impede this goal's full realization but do not alter its content.

The French mission for young children has a long history. Two centuries ago, the earliest forerunners of today's preschools were crowded shelters run by charities for children of the working poor. In the 1830s, as industrialization added to the numbers of children needing care, the Ministry of Commerce and Public Works encouraged the expansion of shelters and promoted their educational potential. Half a century later, the Ministry of Instruction (now the Ministry of National Education) assumed responsibility for many of the shelters and added them to the free,

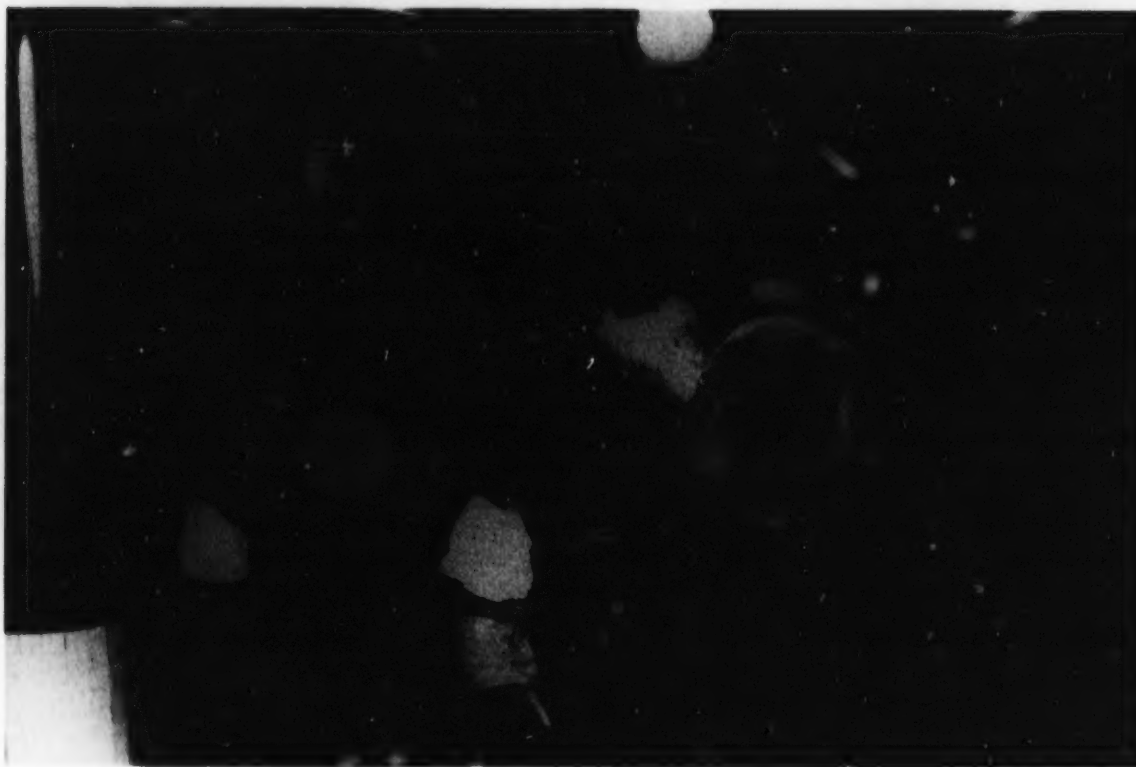
secular system of national education. They were officially renamed "*écoles maternelles*." Since then, the French government has steadily expanded its public preschool system until, in the 1980s, the system reached and included nearly all three, four, and five year olds (including the 13 percent in publicly subsidized, privately run programs). Throughout this expansion, the government has also improved program quality by reducing class sizes, training teachers to higher levels, and evolving a curriculum suited to children's integrated needs for education and care.

France's infant-toddler programs have more recent origins but show similar patterns of improvement over time. They were established after World War II to combat malnutrition and disease among children in low-income families having mothers working outside the home. Although little more than hospital wards, they were effective in achieving their health goals. However, as infant-health problems lessened, the centers' programs broadened to meet children's needs more fully. Today's programs retain their foundations in health care but employ more highly trained staff and emphasize developmentally appropriate activities. Experience gained in these centers is now guiding efforts to improve family day care through outreach and training for home-based caregivers.

The children's programs we visited exhibited sensitivity to the full range of children's needs in many ways. In preschools we noted the careful interspersing of free play with guided instruction; game time employed to introduce aesthetic elements of rhythm, grace, and song;



Children's needs and perspectives define the goals of child care programs in France.



Children romp joyfully on a dragon that coils through a Saint Herblain preschool and adjoining infant-toddler center.

lunch hours that were unhurried and that emphasized social interaction; and the allocation of special places and times for taking leave from and rejoining parents.

In infant-toddler centers we learned about the assignment of each infant to a particular caregiver; directors' efforts to help infant nurses learn developmentally appropriate practices; and special programs to help working mothers make the transition to out-of-home care for their infants at the end of their legal maternity leaves.

In the United States, over 7.5 million children under six years of age are in out-of-home care and the demand is growing. Yet we have embraced no public mission for every child in care but subscribe instead to different programs for different reasons: to enable parents to work, to help families get off public assistance, to deliver social services, to support the equality of women, and to enhance the

chances of a child's later success in school and in adult life.

If we examined our policies and programs through French eyes, we would ask: What is the effectiveness of each one in meeting children's integrated needs for education and care? We would not allow income and family background to determine which children have their needs met. We would take it for granted that we are obliged to apply reliable knowledge about children's needs to any children's program that is publicly funded or endorsed. We would quickly see where we are succeeding and where we fall short. We would commit the resources needed to help all programs "welcome" every child and "awaken" in each one the capacity to grow and live well for the good of us all.

Targeting All Children for School Success

National French census data show that preschool improves the rates at which children from all socio-economic backgrounds pass the first grade, which is a good indicator of later school success. These data confirm the French belief that preschool is an effective counterbalance to other differences, such as region and background, because its aims are the same and its programs similar for all children in the country. (See Table below) In the 1980s, the French Ministry of National Education capped a century of educational history by bringing virtually 100 percent of three to five year olds into public or publicly subsidized preschools. It has now started, for the first time, to target some communities having high rates of first-grade failures as "priority zones"

(*zones d'éducation prioritaire*) and to give them additional educational resources.

Preschools in priority zones receive more teachers (to enable them to reduce class size), extra materials, and expert consulting. The policy goal is to improve the overall quality of education in each zone but explicitly not to restrict such efforts to particular categories of children. Even so, because of the large concentrations of immigrants in priority zones, the French approach this program with extreme caution and have targeted only eight zones to date: They worry that such a singling out may inadvertently lead to more discrimination for populations already burdened.

First-grade-repeat Rates for French Pupils by Father's Occupation and Number of Years in Preschool

Father's Occupation	Number of Preschool Years		
	1	2	3
Professional and Executive	11.6%	10.9%	8.0%
Skilled Worker, Artisan, Shopkeeper	25.1	21.8	15.5
Farmer, Unskilled Worker, Unemployed	41.4	38.1	32.6

Source: *Ministère de l'Éducation Nationale, 1983*

Teachers and other professionals having high levels of training in child development and early childhood education are the key to quality in child care. Every other component of program quality depends on them.

In France, staff training and experience are considered the foundation of quality in child care. Public policy therefore seeks to ensure that good staff are recruited, trained, and retained. To these ends, training schools are subsidized, graduate students in early childhood and elementary education are given stipends, and professional salaries are set at levels comparable to those for jobs requiring similar credentials elsewhere in French society.

Within programs, staff qualifications enter into all decisions about the appropriate care of children, even those concerning the number of children assigned to each teacher or caregiver. In general, for each age group, staff with higher skills are responsible for more children per adult than staff with fewer skills or less experience.

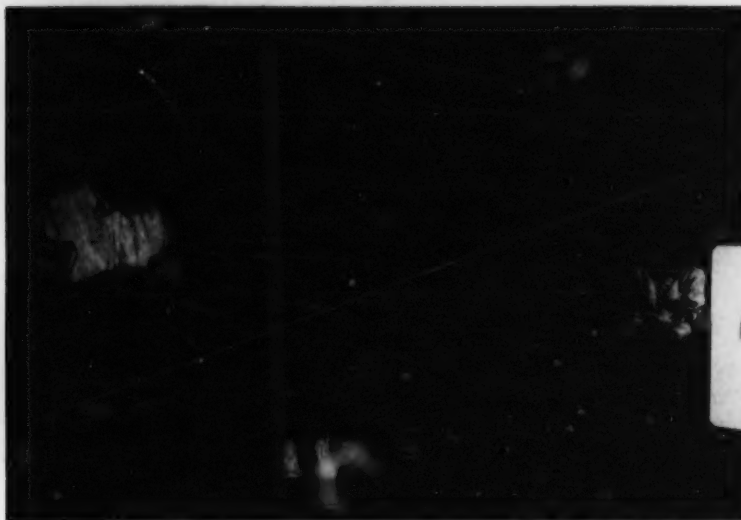


Well trained in early childhood and elementary education, preschool teachers are able to manage large groups effectively.

History has influenced in different ways today's ratios in French preschools and infant-toddler programs. In preschools, during the early decades of the 20th century, public policy gave priority to expanding enrollment despite relatively low budgets for school construction. Teachers were often assigned classes of 40 pupils or more. In an attempt to offset the negative impact on program quality of these large class sizes, the Ministry of National Education created and steadily improved a professional corps of teachers. Today, every preschool teacher in France has the equivalent of a master's degree in early childhood and elementary education.

In the preschool classrooms we visited, each teacher skillfully managed about 22 children while giving every child individual attention. This teaching load, which is large by American standards, is lightened in two ways. A teacher has the half-time assistance of an aide who helps with dressing and cleaning children and other physical-care tasks. Also, teachers have a two-hour midday break for lunch and class preparation. During this time a special staff is in charge of feeding children and supervising their naps.

In infant-toddler centers, each adult cares for fewer children than in preschools. These higher ratios prevailed even in the earliest centers, in the 1940s, which were staffed principally by medical aides. Their relatively low levels of training were taken into account by assigning only a few children to each one. Since then, increasing knowledge about child development has confirmed the value of high ratios while their specific uses have grown more sensitive to staff



Preschool teachers earn salaries equivalent to those of primary school teachers.

qualifications. In today's typical center, each early childhood educator, having two years of professional training, works with eight toddlers, whereas each infant nurse, having less training, cares for five infants. On-site training and supervision of infant nurses is a high priority of center directors. Outside infant-toddler centers, in licensed family day care, where caregivers are less skilled and more sporadically supervised, the French set a limit of three children (other than the caregiver's own) for each home.

American researchers arrive at conclusions similar to those upheld in France about the critical importance of well-qualified and stable staff in ensuring good care for children. Even so, in public policy debates, American experts focus primarily on high adult-to-child ratios as predictable guarantors of program quality. Yet in states and localities where improvement in ratios is likely to be slow for years to come, a strong, supportive strategy—which would also enhance the effectiveness of high ratios with special-needs children—would be to push for improvements in staff training. The attractiveness of this strategy for program operators would depend on the costs of using more highly qualified, as opposed to more numerous, staff.

Awards for Teachers in Training

When entering preschool teacher-training programs, French graduate students agree to spend five years in the field after completing their degrees. In return, the French Ministry of National Education provides their education free of charge and gives them a modest stipend to help cover living expenses.

This quid pro quo addresses two needs at once: the recruitment of qualified candidates to the field and the retention of them in their jobs for a predictable time. At present, in the Paris region, the applicants for preschool/elementary teacher-training programs outnumber the available places by five to one.

American child care programs suffer severe problems in recruiting and retaining good staff. These might be alleviated to some degree by creating service fellowships for outstanding students in undergraduate and graduate programs of early childhood education and child development. These fellows would be honored by financial awards in return for field service. Such awards would complement efforts already under way to promote in-service paths leading to teaching credentials.

Professional Staff in French Child Care

In France, highly qualified professionals fill the large majority of staff positions in French preschools and infant-toddler centers. They receive salaries comparable to those of professionals having equivalent levels of training elsewhere in society, and their turnover rates are low.

Preschools

All teachers (*institutrices*) have the equivalent of a master's degree in early childhood and elementary education. And, in preschools having fewer than five classes, teachers themselves carry out administrative responsibilities. In the larger preschools, a director (*directrice*) is the school administrator, and often teaches as well, but exercises no pedagogical authority over other teachers.

Infant-toddler Centers and Family Day Care Networks

A director and (in larger centers) an assistant director are pediatric nurses (*puéricultrices*) with special training in public health, child development, and program administration. Among a director's most important responsibilities are the super-

vision and training of less skilled staff.

Educators (*éducatrices*) have the equivalent of two years of college (a *baccalauréat*) followed by a two-year professional degree in early childhood education and child development. In centers they are responsible for toddlers; in family day care networks they direct children's group activities.



Municipalities hire special staff to provide care during lunch and nap time in preschools.

INCENTIVES OPEN THE DOOR TO BETTER FAMILY DAY CARE

Incentives and encouragement work better than threats and penalties in recruiting, licensing, and retaining home-based caregivers.

Family day care—increasingly linked with centers—accounts for one third of out-of-home care for French infants and toddlers.

In France, the improvement of family day care is a top priority because one third of the infants and toddlers in out-of-home care spend their days in nonrelatives' homes. The French find that carrots work better than sticks to bring unlicensed caregivers into the system.

French law defines an independent family day care provider (*assistante maternelle*) as the employee of parents, not as an independent contractor. A license therefore entitles the caregiver to a number of employee benefits including social security insurance and a minimum wage. After becoming licensed, a caregiver receives a stream of information and help. Notices and pamphlets arrive regularly by mail. A specially trained pediatric nurse visits her from four to 14 times a year. She is encouraged to do her job well and supported in improving her skills. Her isolation is reduced. At the same time, outreach visits to her home open the door to the regular monitoring of site condi-

tions and care quality by public representatives.

The benefits of being licensed^d appears to outweigh possible drawbacks such as the legal limit of three children per home other than the caregiver's own: 75 percent of all French family day care providers, including those in networks, have licenses.

In the United States, working parents use family day care twice as much as center care for infants and toddlers and for hundreds of thousands of three to five year olds as well. Many parents prefer individual homes as care settings. Yet they are often troubled about the quality of the particular caregivers and homes they can find and afford. As many as nine of 10 family day care homes are estimated to be unlicensed.

Government officials recognize the potential for problems in unmonitored family day care homes. Even licensed homes are rarely visited. Yet the fear is often voiced that more regulation and surveillance might shut down caregivers on whom parents depend, thus aggravating problems of supply.

Americans seeking improvements in family day care could profitably experiment with a shift in focus inspired by the French example. Better quality need not be pursued only through the punitive enforcement of rules. It can also be pursued through incentives. Even modest support offered to already licensed caregivers, such as the federal Child Care Food Program, has proved effective in some states in bringing new caregivers into the system.



In France, family day care networks organize special activities for children and caregivers.



Why Get a Family Day Care License? Employee Benefits

A family day care provider (*assistante maternelle*) in France has good reason to get a license. First, the law entitles her to social security insurance for retirement and disability, unemployment insurance, and maternity leave. This costs \$575 a year per child. It is paid by parents and then reimbursed by the government.

Second, the law sets a minimum daily wage of \$9.25 per child and an hourly minimum of \$1.25 per child for part-time care. The caregiver remains free to bargain in private agreements with parents

for whatever rate the market will bear, which is often higher than the minimum. The law also fixes minimums for paid sick leave and vacation time, and specifies allowances to cover food, toilet articles, household products, and utility fees related to a child's care.

Hubs and Homes, French Style

In France, family day care networks (*crèches familiales*) operate on a far larger scale than in the United States. They effectively address the interconnected issues of quality, affordability, and supply of infant and toddler care and already include one fourth of licensed French family day care providers.

Each network has a hub linked to as few as six or as many as 35 family day care homes. The hub pools administration, training, activities, and equipment-lending in the hands of a staff directed by a specially trained pediatric nurse. The nurse-director hires and trains child care providers, matches each one with two or three children, supervises their training by specially qualified staff, maintains contact with municipal officials—who collect parent fees and handle licensing and payroll—and even organizes back-up services for children whose providers get sick.

To offer an antidote to the isolation of home-based care, the hub staff organizes small-group sessions for caregivers and children, typically once a week for half a day at a special facility. While caregivers consult with the network director, attend a



Study panelist Bettye Caldwell "cooks" with a toddler at a center that also functions as the hub of a family day care network in Saint Herblain.

training session, ask for referrals to social workers and other experts, or just chat with other caregivers, the children participate in activities supervised by an early childhood educator.

Another advantage of networks for caregivers is the relief it gives them from negotiating directly with parents about the rate and payment of fees. Municipal officials handle all these matters and pay caregivers regularly. Moreover, caregivers in networks are municipal employees and thereby entitled to significant employee benefits.

In the United States, networks that provide information and equipment and offer other services to family day

care homes are very limited in scale and scope compared to those in France. Following the French example, Americans could usefully strengthen and multiply these networks.

City and county agencies, or private entities, could contract more extensively with existing child care centers to operate hubs for recruiting caregivers, improving their skills, reducing their isolation through regular meetings and social exchanges, and offering the children in their charge access to group activities. With network administrators responsible for fee collection and caregivers' payroll, there would be fewer causes of stress between parents and caregivers. The overall result could well be to increase the supply, stability, and quality of family day care.

Other uses of networks could be devised. Private employers might craft versions suited to the needs of their employees either for regular child care, sick-child care, or during extended hours or odd work shifts.

A child's happiness and intellectual and emotional development are rooted in physical well-being. Preventive health care is integral to the mission of child care.

In France, public infant-toddler programs evolved from public health programs. Following World War II, the French created the national Maternal and Infant Protection service (*Protection Maternelle et Infantile* or PMI) to combat high infant-mortality rates, childhood disease, and poor sanitary conditions. Its program included pre- and postnatal health care for mothers and sanitary care for infants and toddlers of working parents.

By the 1960s, the PMI had significantly reduced infant mortality. France now ranks fourth in the world with a rate of eight deaths for every 1,000 live births. The PMI continues to be a comprehensively effective preventive health service for all children from before birth to age six. It consists of 5,000 affiliated physicians and 4,600 public health nurses, based at hundreds of clinics, hospitals, and laboratories. The PMI spends an amount equal to \$55 a year per child under six.

A number of mechanisms link the PMI with all forms of out-of-home infant and toddler care and, less intensively, with preschools. Proof of regular medical exams is required at the time of a child's admission to, and at intervals during continuance in, every public child care program. The PMI readily gives these exams at no charge to parents or certifies that private physicians have performed them. By law, a child must have a medical checkup once a month until nine months of age and then at four- or six-month intervals until six years.

The PMI issues operating permits for all infant-toddler centers and sets staffing requirements. For these centers as well as for preschools, PMI codes establish

health, safety, sanitation, and nutrition standards. A PMI physician is assigned to every program as a regular consultant and as the arbiter on compliance.

The United States has no counterpart to France's universal preventive health service for children. An infant-mortality rate of 10 deaths for every 1,000 live births places the United States behind most major industrial countries. In addition, child-immunization rates are far from universal and have recently declined for preventable childhood diseases such as whooping cough, measles, polio, and mumps.

These and other severe child-health problems in the United States affect many more children than the 21 percent of infants and toddlers and the 50 percent of three to five year olds who are currently in out-of-home care. Yet, at a minimum, United States' child care programs, a number of which already require immunizations, should also require regular medical exams as a condition of participation. In addition, with the assistance of public health bureaus and local community health clinics, methods for establishing regular consultation and referral services for children in out-of-home care could be developed.

Specialists for Infants

In the United States, high infant death rates, high childhood disease rates, and the rising demand for infant and toddler care point to the need for professionals capable of working with women and very young children in a variety of settings. In France, *puéricultrices*, pediatric nurses trained in public health, child development, and program administration, serve in a variety of jobs and move among them with some frequency, thus knitting together the field of infant care as well as contributing to it. They may be hired by hospitals as nurses, by municipalities as directors of infant-toddler centers or family day care networks, or by the Maternal and Infant Protection service as consultants to child care programs or outreach advisers to pregnant women. In the United States, public health or pediatric nurses given similar training could fill similar roles.

Sick Children: Insured Employer

French parents and employers often face a problem that is familiar to Americans: Sick children cannot attend preschools, substitute care is not readily available, and working parents are forced to miss work. Disruption in the office and stress at home result.

To tackle this problem, one French entrepreneur is experimenting with a new insurance plan for employers. An employer pays the insurance company an annual premium of about \$40 per employee, when all employees are covered. (Plans limited to employees who are parents are also available.) Whenever

an employee's child becomes ill, the insurance company pays for a health worker licensed to provide in-home service. Parents may also choose to stay home themselves, just as though there were no insurance plan.

In the United States, the Bureau of National Affairs estimates (1989) that working mothers lose between five and 29 work days each year to tend sick children of all ages. These absences annually cost employers from \$2 to \$12 billion. Some efforts are under way to provide care for sick children. Insurance for employers located in areas where home-care services are available might be an efficient remedy in some cases.



Every child care program in France has access to a consulting public health physician.

Finding At-risk Mothers and Encouraging Them to Use Pre- and Postnatal Health Services

At least one third of all new mothers in France receive visits from pediatric nurses who advise them on nutrition and other aspects of pre- and postnatal care. These visits are triggered by risk factors identified from applications for the prenatal component of the universal young-child allowance that forms part of France's family allowance system.

The United States could benefit from similarly formalized health outreach, systematically aimed at pregnant women and new mothers who most need it. At-risk cases could be identified at the time of women's first requests for prenatal care from factors such as a woman's advanced pregnancy, young age, or problems with a prior pregnancy or birth. Pediatric or public health nurses could be recruited to provide outreach to the women's homes.

More broadly, France uses financial incentives, through its family allowance system, to encourage the full use of prenatal and neonatal health services. Prenatal allowances are paid to all expectant mothers—when they register their pregnancies, consult a public health or private physi-



cian, and follow the physician's medical, nutritional and other instructions. After a child's birth, similar allowances encourage parents to take infants for the periodic medical exams specified by law and available free of charge through the national preventive health service.

The United States has neither a family allowance system nor a comprehensive health system for mothers and infants. Nonetheless, Americans could employ financial and other incentives more effectively to achieve the fuller use of existing health services. Such measures—along with a much-needed expansion of child-health programs—could considerably reduce infant mortality and cut down on the number of infants needing special and costly medical therapy.

Infant-toddler and preschool programs in France are integrated with preventive health care.

Parental leave policies help to meet society's broad obligation to infants as well as to parents.

France's maternity leave law dates from 1946. Its original intent was to protect the health of mothers and infants. It is financed by a payroll tax levied on all French employers and based on a principle similar to that of social security: Society has a strong interest in the nurture of new infants and newly adopted children and ought to help parents provide it.

The French law guarantees each woman 16 weeks paid leave for childbirth or 10 weeks paid leave for adoption. (Fathers get four days of paid leave.) At the end of her leave a woman returns to her former job in its identical form including all former benefits.

Recent additions to French law also give either parent the right to request unpaid absence for up to two years after a child's birth or adoption. Alternatively, or consecutively, a parent can ask for part-time employment during this period. (Employers having fewer than 100 employees can request, and often receive, an exemption.) This "parent-education leave" (*congé parentale d'éducation*) is viewed as time off from one set of responsibilities that are important to society to learn another set that are critical to society. In contrast to the universal use of maternity leave, this extended leave is used infrequently, primarily by women in lower-paying jobs and by mothers of children having health or other problems.

In France, we interviewed personnel directors and managers in several large French companies to discuss the impact of parental leave policies on business. We learned about effective management strategies for adapting to parental leaves

and for reintegrating employees into the workforce.

We were surprised by the employers' relative lack of concern about the costs of parental leave. French employers appeared to accept such leaves as natural and inevitable absences that did not impinge on business to any great degree and that fulfilled obvious social obligations.

In the United States, a handful of states require employers to grant parental absences, usually without pay, for the birth or adoption of children. Additionally, federal law prohibits employers from discriminating against pregnancy in providing employee benefits. Altogether, fewer than 40 percent of working women are covered for paid maternity "disability" leave, at least during a period of narrowly defined physical incapacity. The majority of working women must use vacation time and other paid and unpaid leaves for absences related to childbirth and adoption. American employers generally oppose laws mandating parental leave. They typically point to the cost and disruption involved and view childbearing as a private, not a social, choice and responsibility.

Americans who are debating parental leave laws and policies might benefit by considering more fully the interests of all of society in assisting parents to meet the needs of infants. They might also consider strategies for sharing the costs of parental leave among all employers.



Many infant-toddler centers in France offer special programs for mothers and their infants to ease the transition from maternity leave to out-of-home care.

Employers and Families in France

Family benefits in France are predominantly financed by employers through a universal payroll tax of nine percent. (Employees do not contribute.) This levy supports the national system of family allowances that provides significant income supplements to families. For example, a family with two young children presently receives \$1,117 annually, regardless of its income. Needier families receive higher supplements, and there are numerous formulas to cover specific conditions and needs such as

prenatal health care and the care of a handicapped child.

The National Family Allowance Fund (*Caisse Nationale des Allocations Familiales* or CNAF), is a public entity directed by a tripartite board representing employers, labor unions, and official family representatives. A small division of the CNAF (Social Action) subsidizes infant-toddler centers through payments to municipalities which establish and administer such centers.



Two preschools in Paris are housed in this building by French architect Roger Taillibert, who also designed Montreal's Olympic Stadium.

BEAUTIFUL BUILDINGS CELEBRATE CHILDREN

Well-designed buildings for child care display the value society places on its children. Well-designed space and furnishings are integral to program quality.

The French house their child care programs in buildings that express the value they place on children. In their exterior architecture, internal organization of space, use of sound- and shock-absorbing materials, and emphasis on light and color, preschools and infant-toddler centers are visible evidence of French aspirations for the future of their nation.

Parisian centers for children are exceptional by any standards. Postcards picturing them sit on the same racks as shots of the Eiffel Tower and the Arc de Triomphe. For Jacques Chirac, the Mayor of Paris and former Prime Minister of France, children are a priority. Showplace centers for child care dramatize both his exuberance and the popular support his commitment to children enjoys. Data from

other regions reveal that officials and citizens in many parts of France consider it essential, and find the needed resources, to house children's programs well. French architects are trained to design for children and are awarded prizes for excellence. Manufacturers make a wide range of attractive and practical materials and furnishings for children's facilities.

The arrangement of spaces inside children's centers respects children's many needs and thereby contributes to program quality. Different spaces are used for working, playing, sleeping, hygiene, and even for farewells and hellos with parents. Classroom nooks invite children to spend some time by themselves or play quietly with a special friend.

In the United States, many child care centers are located in church basements or older buildings shared with other organizations. They often have poor lighting, cramped space, an unpredictable furnace, or other drawbacks. Quarters need meet only minimal standards of safety and cleanliness to be officially viewed as sufficient locations for the supervision and care of children. Our buildings for children demonstrate our priorities.



In France, high aesthetic standards inform the design of spaces for children.

PARENTS' CHOICES WORK BEST FOR CHILDREN WHEN PUBLIC POLICY SUPPORTS QUALITY IN CHILD CARE

Parents have the right to choose what's best for their children but cannot exercise this right freely if they cannot find or afford programs of quality. Public policy supports parental choice by ensuring that parents have access to such programs.

The long evolution of French thinking and policy regarding children's programs has led to a child care system that is largely publicly funded. The French uphold this system as necessary to support all parents, whatever their income level, in their right to choose care that responds to children's full range of needs.

At the same time, the French concur that even the best public programs cannot be imposed upon parents but must be freely accepted by them. The nearly universal preschool system has always been voluntary. That nonworking and wealthy parents choose to send their children to preschools with as great a frequency as other parents is convincing evidence of preschool quality.

The French are quick to point out that the most compelling unmet portion of France's public

responsibility to children concerns infants and toddlers and their working parents. In the past two decades, mothers of very young children have joined the workforce in increasing numbers and at rates closely resembling those in the United States. Public policy respects parents' preferences for different types of out-of-home care by seeking to improve all types. Public financing is budgeted at the amount needed to bridge the gap between what parents can afford and what good programs cost, which varies by program type.

In the United States, public policy often defends parental choice by financing child care programs through indirect subsidies to parents, to leave them free to make their own arrangements. The most obvious example is the federal Dependent Care Tax Credit, which enables families earning taxable



Study panelist Hillary Clinton, talks with a preschooler in Nantes.



Parents in France have a choice of quality programs for their children.

incomes to deduct a part of their child care expenses. Such deductions amount to \$3.5 billion annually, about half of federal "expenditures" on child care. This and other forms of indirect financial assistance reach many more families than are served by programs like Head Start that receive direct subsidies. Many poor families get no help at all.

In the name of respecting parental choice, the American debate on child care has unduly limited the focus of public concern. Americans have not considered fully the extent to which our policies reinforce the economic realities that put quality child care out of reach of many parents. We have not clarified our reasons for allowing families most in need of help to go without it. Parents would not be forced to use any one type of care if improvements in affordability, supply, and quality occurred in all major types.

To this end, a consistent policy, pursued over time and flexibly adapted to change, could, in the United States as in France, bring closer the day when all parents would have the chance to choose what's best for their children in the interest of us all.

SITE VISITS AND MEETINGS, MARCH 6-17, 1989

Preschool and Infant-Toddler Programs

Ecoles Maternelles

Four in Paris
One in Les Saules
(including parents' meeting)
One in Nantes

Jardin d'Enfants

(a crèche-like program for 2-5 year olds)

One in Paris
One in Nantes

Programmes Périscolaires

One in Paris
Two in Nantes
Two in Saint Herblain

Crèches Collectives

Four in Paris
One in Saint Herblain

Crèches Familiales

One in Paris
One in Saint Herblain

National Ministries and Agencies

Caisse des Dépôts

Caisse Nationale des Allocations Familiales

Ministère de l'Education Nationale

Ministère de la Solidarité, de la Santé et de la Protection Sociale

Ministère du Travail

Municipal and Department Offices

Caisse des Allocations Familiales-Nord Atlantique

Mairie de Nantes

Mairie de Paris

Mairie du 12ème Arrondissement, Paris

Mairie du 20ème Arrondissement, Paris

Mairie de Saint Herblain

Training Institutions

Ecole de Puériculture, Nantes

Ecole Normale d'Instituteurs d'Auteuil, Paris

Pediatricians and Other Health Professionals

Physicians and administrators of the Protection Maternelle et Infantile in Paris and Nantes

Business and Unions

Abeille Assurances

Les Assurances Générales de France (AGF)

Conseil National du Patronat Français (CNPFF)

Confédération Française Démocratique du Travail (CFDT)

E.I. du Pont de Nemours et Cie

IBM France

Renault

Société Nationale de l'Industrie Aérospatiale (SNIA)

Organizations

Centre d'Assistance Educative du Tout Petit

Centre Henri Rousseau

Centre International de l'Enfance

Centre de Recherche de l'Education Spécialisée et de l'Adaptation Scolaire (CRESAS)

Groupe de Recherche et d'Action Pour l'Enfance (GRAPE)

Institut de l'Enfance et de la Famille (IDEF)

Institut National de la Statistique et des Etudes Economiques (INSEE)

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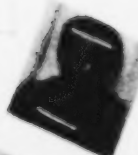
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